## MICHIGAN DEPARTMENT OF STATE

## Reassignment by a Watercraft Dealer or An Insurance Company Holding a Titled Watercraft for Resale

I certify I conveyed ownership of the watercraft described on the attached watercraft title to the person(s) named below and further certify the watercraft is free of all previous liens.

Name of Purchaser(S)				Purchaser's Street Address			
City	State		Zip Code	Year N		Make	
Hull Identification Number				Length	FT.	Date of Reassignment  IN.	
Name of Dealership or Insurance Company				Street Address of Dealership or Insurance Company			
City	STA		Zip Code	Name(s) on Face of Attached Title			
Signature of Agent X			Printed Name of Agent		Title	Number of Attached Title	

Watercraft dealers use this form when all reassignments on a watercraft title have been used. Insurance companies use this form when selling a titled watercraft acquired after payment of a claim.

WR-15 (6/10)

Authority Granted Under Public Act 303 of 1967 as Amended.